

**Redevelopment Agency of the City of San Diego  
College Community Redevelopment Project Area  
Project Area Committee (PAC)**

**2008 CANDIDATE REGISTRATION FORM**

(Please Print and Check Appropriate Boxes)

I, \_\_\_\_\_, volunteer for appointment to the Project Area Committee (PAC) for the College Community Redevelopment Project. I certify that I am at least 18 years of age and that, within the selected boundaries of the College Community Redevelopment Project Area, I am eligible to be a candidate and seek to be elected on **Tuesday, October 7, 2008**, (Election to commence at 6:00 p.m., Faith Presbyterian Church) as a representative in the following category (**check one**):

- |   |   |
|---|---|
| <input type="checkbox"/> Residential Tenant                     | <input type="checkbox"/> College Area Community Council   |
| <input type="checkbox"/> Fraternity Representative              | (CACC) Representative                                     |
| <input type="checkbox"/> Sorority Representative                | <input type="checkbox"/> Religious Centers Representative |
| <input type="checkbox"/> Community Organization Representative* | <input type="checkbox"/> Business Owner                   |
| <input type="checkbox"/> Residential Owner Occupant             |   |
| <input type="checkbox"/> SDSU Student                           |   |

Please check **one** appropriate box and fill in the information requested:

- ☐ I am a Residential Tenant ( ) **OR** Residential Owner-Occupant ( ) (**Check ONE**) living at \_\_\_\_\_.
- ☐ I am a member of the Community Organization (i.e., representing **one** of CACC, Religious Centers, or Other) named \_\_\_\_\_ located at \_\_\_\_\_, which serves the Project Area and **has been in existence at least two (2) years prior to the PAC election for which they are a candidate.**
- ☐ I am currently a Student at San Diego State University.
- ☐ I am an Owner of a Business (or Property) **whose name and location** are \_\_\_\_\_
- ☐ I am a representative of a Fraternity or Sorority (i.e., one of the corporations which owns or leases the chapter houses and **not a student member**) which is named \_\_\_\_\_ and located at \_\_\_\_\_.

**NOTE:** \* Requires that representative must be selected by that Organization and formally nominated (i.e., by minutes or other written formal action) to represent on its behalf as a PAC Member and / or vote on its behalf in electing the representative. The Organization **must have been in existence at least two (2) years prior to the PAC election for which they are a candidate.**

My prior experience in community affairs and/or my other qualifications to serve on the Project Area Committee are as follows (attach additional sheet, if necessary): \_\_\_\_\_

1. I acknowledge receipt of, and have read, Project Area Committee Conflict of Interest Code Appendix A, Designated Positions Duties and Categories and Appendix B, Disclosure Categories. I understand, and agree, that if elected, I will comply with the requirements of the Political Reform Act, and, that failure to do so may be grounds for removal from the Committee.  
(Initials\_\_\_\_\_)

2. I acknowledge that I have read Municipal Code Sections 27.3588 & 26.0440 and understand that enforcement of the Conflict of Interest Code and Political Reform Act lies with the San Diego City Clerk's Office and the City's Ethics Commission. (*Initials*\_\_\_\_\_)
3. I acknowledge that I am required to submit an annual Statement of Economic Interest (CA Form 700) as well as assuming-and leaving-office statements. (*Initials*\_\_\_\_\_)
4. I acknowledge that failure to comply with the above requirements may result in being subject to enforcement measures and/or fines being levied. (*Initials*\_\_\_\_\_)

**Contact Information:**

Address\_\_\_\_\_

Phone:\_\_\_\_\_

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

**If you have any questions regarding the PAC and/or candidate eligibility, please contact Eliana Barreiros at (619) 236-6267 or via electronic mail to [ebarreiros@sanidiego.gov](mailto:ebarreiros@sanidiego.gov).**

\*\*\*\*\*

Proof of Eligibility: \_\_\_\_\_

Staff Certification: \_\_\_\_\_

Dated: \_\_\_\_\_

- Attachments
1. Redevelopment Agency of the City of San Diego Project Area Committee Conflict of Interest Code Appendix A
  2. Redevelopment Agency of the City of San Diego Project Area Committee Conflict of Interest Code Appendix B
  3. Municipal Code Section 27.3588
  4. Municipal Code Section 26.0440
  5. Statement of Economic Interest (CA Form 700)

*This information will be made available in alternate format upon request.  
Requests for accommodations must be made 72 hours in advance.*